



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY**

04/29/91

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NYD986944361

FACILITY NAME -> ATLANTIC SERVICE STATION

MAILING ADDRESS -> 1801 MARKET ST-MKT RISK MGMT
PHILADELPHIA, PA 19103


INSTALLATION ADDRESS -> 2232 DOWNER ST RD
BALDWINVILLE, NY 13027

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: DELAUGHTER WILLIAM SR ENV ENGR
ATLANTIC SERVICE STATION
1801 MARKET ST-MKT RISK MGMT
PHILADELPHIA, PA 19103

<p>Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).</p>		 EPA		Notification of Regulated Waste Activity		Date Received (For Official Use Only) 91-03-15	
United States Environmental Protection Agency							
I. Installation's EPA ID Number (Mark 'X' in the appropriate box)							
<input checked="" type="checkbox"/> A. First Notification		<input type="checkbox"/> B. Subsequent Notification (complete item C)		C. Installation's EPA ID Number MYD986944361			
II. Name of Installation (Include company and specific site name) ATLANTIC SERVICE STATION							
III. Location of Installation (Physical address not P.O. Box or Route Number)							
Street 2232 DOWNER STREET ROAD							
Street (continued)							
City or Town Baldwinsville				State NY	ZIP Code 13027		
County Code 01		County Name Onondaga					
IV. Installation Mailing Address (See Instructions)							
Street or P.O. Box 1801 MARKET ST MKT RISK MGT							
City or Town Philadelphia				State PA	ZIP Code 19103-1699		
V. Installation Contact (Person to be contacted regarding waste activities at site)							
Name (last) DeLaughter				(first) William			
Job Title SR ENV Eng Spec				Phone Number (area code and number) 215-977-6108			
VI. Installation Contact Address (See Instructions)							
A. Contact Address Location <input type="checkbox"/> Mailing <input checked="" type="checkbox"/>		B. Street or P.O. Box					
City or Town							
State				ZIP Code			
VII. Ownership (See Instructions)							
A. Name of Installation's Legal Owner ATLANTIC Resining & Marketing							
Street, P.O. Box, or Route Number 1801 MARKET ST							
City or Town Philadelphia				State PA	ZIP Code 19103-1699		
Phone Number (area code and number) 215-977-6108				B. Land Type P	C. Owner Type P	D. Change of Owner Indicator Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
				Date Changed Month <input type="checkbox"/> Day <input type="checkbox"/> Year <input type="checkbox"/>			

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

1. Generator (See Instructions)
- ☐ a. Greater than 1000kg/mo (2,200 lbs.)
- ☐ b. 100 to 1000 kg/mo (220 - 2,200 lbs.)
- ☒ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- ☐ a. For own waste only
- ☐ b. For commercial purposes
- Mode of Transportation
- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify
- ☐ 3. Treater, Storer, Disposer (at installation)
- Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Burner - indicate device(s) - Type of Combustion Device
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner - indicate device(s) - Type of Combustion Device
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒
2. Corrosive (D002) ☐
3. Reactive (D003) ☐
4. EP Toxic (D000) ☐
- (List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s))
-

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature

Name and Official Title (type or print)

Date Signed

William A. DeLaughter
Sr Environmental Eng Spec

3/11/91

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)